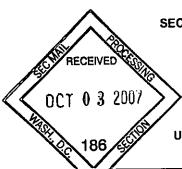
FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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	OMO	ADDDON/A	1

IB Number: 3235-0

OMB Number: 3235-0076

Expires: April 30, 2008

Estimated average burden hours per form 16.00

SEC USE ONLY							
Prefix		Serial					
	1						
	DATE R	ECEIVED					
1	1						

Name of Offering (☐ check it his is an amendment and name has changed, and indicate change.) SRKP 10, INC.
Filing Under (Check box(es) that apply:) ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing: ☐ New Filing ☑ Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
SRKP 10, INC.
Address of Executive Offices (Number and Street, City, State Zip Code) 4737 North Ocean Drive, Suite 207, Lauderdale by the Sea, FL 33308-2920 Address of Principal Business Operations (Number and Street, City, State and Zip Code) Telephone Number (inclify) Area Code) Telephone Number (Including Alea Code)
Address of things Table
(if different from Executive Offices) Not Applicable Not Applicable
Brief Description of Business:
Type of Business Organization ☑ corporation ☐ limited partnership, already formed ☐ other (pleas
business trust
Actual or Estimated Date of Incorporation or Organization: O 1 O 6
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mall to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION ATTENTION Conversely failure to file the appropriate
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate

federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	ş
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of ethe issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers. Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Managin	and/or ng Partner
Full Name (Last name first, if individual) Rappaport, Richard	
Business or Residence Address (Number and Street, City, State, Zip Code)	
4737 North Ocean Drive, Suite 207, Lauderdale by the Sea, FL 33308-2920	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General Managin	and/or ng Partner
Full Name (Last name first, if individual) Pintsopoulos, Anthony C.	
Business or Residence Address (Number and Street, City, State, Zip Code)	:
4737 North Ocean Drive, Suite 207, Lauderdale by the Sea, FL 33308-2920	<u> </u>
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Managir	and/or ng Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Managir	and/or ng Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Managir	and/or ng Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Managin	and/or ng Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Managin	and/or ng Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				В.	INFORMAT	TON ABOU	T OFFERIN	IG				
1. Has the	e issuer sold	l, or does th	e issuer inte								Yes	No ⊠
					l from any in	dividual?						
2. What is	s the minimu	ım investme	ent that will t	oe accepted	i itoini any ii	igivioual:					<u>\$</u>	<u>n/a</u>
								•			Yes ⊠	No □
	he offering p										EU.	u
commis a perso states	the information or simple to be listed in the list the name or dealer, ye	nilar remune ed is an ass ne of the bro	eration for so ociated persoker or deal	olicitation of son or agent er. If more	purchasers of a broker than five (5	in connection or dealer re persons to	on with sale gistered with be listed ar	s or secunii h the SEC a	es in the on ind/or with a	state or		
Full Name Not applica	(Last name	first, if indiv	ridual)			_						
Business o	or Residence	e Address (I	Number and	Street, City	, State, Zip	Code)						
Name of A	ssociated B	roker or De	aler			, •	<u> </u>					
States in V	Vhich Perso	n Listed Ha	s Solicited c	r Intends to	Solicit Purc	hasers						All States
	All States" o					[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[AL]	[AK]	[AZ]	[AR]	[CA] [KY]	[CO] [LA]	[ME]	[DL]	[MA]	(MI)	[MN]	[MS]	[MO]
(IL)	[IN]	[AI]	[KS]	[LN]	[<u>_</u>]	[MY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(MT) [RI]	(NE)	[NV] [SD]	(NH) ITN)	[XT]	[UT]	[\sqrt{1}]	[VA]	[AW]	[WV]	IMI	[WY]	(PR)
	(Last name		<u>. </u>	[177]						-		
1 411 1141110	(2007)		· · · · · · ·									
<u> </u>	or Residence	Addross /	Number and	Street City	State Zin	Code)				-		
Business	or Residence	e Address (i	Mulliber and	oucci, on	,, Oldto, 2.p						. 	
Name of A	Associated B	roker or De	aler .									
States in V	Which Perso	n Listed Ha	s Solicited o	or Intends to	Solicit Purc	chasers						All States
	All States" o				[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	(ID)
[AL]	[AK]	(AZ)	(AR) [KS]	[CA] [KY]	[LA]	[ME]	[MD]	[MA]	[MI]	(MN)	[MS]	[MO]
[IL]	[IN]	[IA] [VN]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]
[MT] [RI]	[NE] . [SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	(Last name			(114)	14.7	<u>, , , , , , , , , , , , , , , , , , , </u>						
			·			•						
Business	or Residenc	e Address (Number and	Street, City	, State, Zip	Code)	_ .	<u> </u>			-	
200000												
Name of A	Associated E	Broker or De	aler	<u></u>			.					
				•	•			-				
States in \	Which Perso	on Listed Ha	s Solicited o	or Intends to	Solicit Pure	chasers		<u>,</u> ,-	 -			All States
(Check */	All States" o	r check indi	vidual State	s)								
(AL)	[AK]	[AZ]	(AR)	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[VV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	(TX)	(UT)	[VT]_	[VA]	[WA]	. [WV]	(WI)	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E O	F PROCEEDS			
Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box ☑ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
		Aggregate Offering Price		4	Amount Aiready Sold**
Type of Security Debt	\$	_	\$;	None
Equity			5		1,037.83
Equity ☑ Common □ Preferred			•		
Convertible Securities (including warrants)	.S	38,571.50 *	9	<u> </u>	None
Partnership Interests			5	;	None
•		None	•	<u> </u>	None
Total	\$ _	39,609.33	1	<u> </u>	1,037.83
Answer also in Appendix, Column 3, if filing under ULOE.					•
Warrants exercisable at \$.01 per share 2.Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	٠				·
or their purchases on the total lines. Either of it answer is more of Estat.		Number Investors			Aggregate Dollar Amount of Purchases
Accredited Investors	<u></u>	8	_ 5	S _	1,037.83
Non-accredited Investors	<u></u>	0	_	5	0
Total (for filings under Rule 504 only)			,	5	
Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.					
		Type of Security			Dollar Amount Sold
Type of offering Rule 505		•	. :	\$_	N/A
Regulation A		N/A_	-	- \$_	N/A
Rule 504		N/A	_ :	\$	N/A
Total			_	\$_	N/A
4.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		_			
Transfer Agent's Fees			}	\$_	00
Printing and Engraving Costs		C]	\$_	. 0
Legal Fees			3	\$_	30,000
Accounting Fees		🗀]	\$_	0
Engineering Fees		🗆)	\$_	0

□ \$_

- \$_

☒ \$

30,000

Sales Commissions (specify finders' fees separately).....

Total

Other Expenses (identify)

	NEED SINGES OF SERVICE CONTROL			15	
 b. Enter the difference between the aggregat C - Question 1 and total expenses furnished in difference is the "adjusted gross proceeds to the 	response to Part C - Question 4.8. I	HIO		(X)	\$ 9,609.33
 Indicate below the amount of the adjusted proposed to be used for each of the purposes not known, furnish an estimate and check the the payments listed must equal the adjusted response to Part C - Question 4.b. above. 	shown. It the amount for any purpose sex to the left of the estimate. The total	e is il of			
jespunse to runt o great and			Payments to Officers, Directors, & Affiliates		Payments To Others
Salaries and Fees		D	\$		\$
Purchase of real estate	*****	D	\$		\$
Purchase, rental or leasing and installation of n	•		\$	_ 🗖	l \$
Construction or leasing of plant buildings and fa			\$	_ 🗆	\$
Acquisition of other businesses (including the confering that may be used in exchange for the issuer pursuant to a merger)	ratue of securities involved in this easets or securities of another		\$		1 \$
·			\$	_	1 \$
Repayment of indebtedness Working capital				_	
Other (specify)					s
· · · · · · · · · · · · · · · · · · ·				_	1 \$
Column Totals	4	-	3,00722		
Total Payments Listed (column totals added)		• • • • • •	🗵 🕏	9	,609.33
				33368	
The issuer has duly caused this notice to be signs signature constitutes an undertaking by the issue the information furnished by the issuer to any non-	ad by the undersigned duly authorized	per 1 Ex	son. If this notice is change Commission	filed , upo	under Rule 505, the following
Issuer (Print or Type) SRKP 10, INC.	1. Harne	ىر		gu31.	<i>,</i> 2007
Name (Print or Type)	Title (Print or Type)		President		
Richard Rappaport			1.0070		
	ATTENTION				
Intentional misstatemen <u>ts or or</u>	missions of fact constitute federal c	rim	inal violations. (Se	e 18	U.S.C. 1001).

